



State of Washington
Application for a Water Right Permit

☒ SURFACE WATER ☐ GROUND WATER
☐ Permanent ☒ Temporary ☒ Short Term

For Ecology Use
(Date Stamp)

RECEIVED

AUG 11 2009

Washington State
Department of Ecology

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: Washington Department of Fish and Wildlife	Phone No: 360-902-8300	Other No:
Address: 600 Capitol Way North		
City: Olympia	State: WA	Zip: 98501
Email Address (optional):		

Contact Name (if different from above): Marty Peoples	Phone No: 360-902-8426	Other No:
Relationship to Applicant: Employee		
Address: 600 Capitol Way North		
City: Olympia	State: WA	Zip: 98501
Email Address (optional): peoplmdp@dfw.wa.gov		

For Ecology Use	APPLICATION NO: <u>52-30527</u>	SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date <u>8/11/09</u> By <u>SC</u> WRIA: <u>18</u>

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: This project is a component of the Elwha Dam Removal Project. A small hatchery will be constructed to rear Elwha River origin salmon in the Morse Creek drainage next to Highway 101. This project is being done to protect against extinction of Elwha River fish in case dam removal activities decimate Elwha River salmon.

Anticipated length of time to complete your project: 2 months

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input checked="" type="checkbox"/> Cubic Feet per Second (CFS)	<input type="checkbox"/> Gallons per Minute (GPM)		
Fish Rearing	5.8 cfs		unknown	October through April
TOTAL:				

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☒ YES ☐ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: 10/01/2009 TO: 04/30/2024

For Ecology Use	APPLICATION NO: _____	SEPA: Exempt/Not Exempt
	Fee Paid: _____	Check No: _____ ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date _____ By _____ WRIA: _____

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source				B.) If Ground Water Source		
<input type="checkbox"/> Spring <input checked="" type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____				<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ _____		
Source Name: <u>Morse Creek</u>				Well diameter & depth: _____		
Tributary to: <u>Straits of Juan De Fuca</u>				Number of proposed points of withdrawal: _____		
Number of proposed diversion points: <u>1</u>				Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Do you have an existing diversion? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				If available, attach Water Well Report and pump test.		
Well Tag ID No. _____						
C.) Point of Diversion/Withdrawal – Legal Description						
Parcel No.	¼	¼	Section	Township	Range	County
05-30-08-540300		SW	8	30 N	05 W	Clallam
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ Feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section _____.						
Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> _____) corner of Section _____.						

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☒ NO

If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO

Provide the owner name(s), address, and phone number:

Washington Department of Transportation,

Kevin Dayton, Olympic Region Administrator,

PO Box 47440 Olympia, WA 98504

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

No Legal Description Available. Part of Highway 101 Right of Way						
1/4	1/4	Section	Twp.	Range	County	Parcel No.
	SW	8	30 N	05 W	Clallam	053008540300

Do you own all the lands on which the proposed place of use is located? ☐ YES ☒ NO

If no, do you have legal authority to make this application? ☐ YES ☒ NO
Provide owner name(s), address, and phone number:

Washington Department of Transportation,
Kevin Dayton, Olympic Region Administrator,
PO Box 47440 Olympia, WA 98504

SW 1/4 SW 1/4
Sect 8

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): There will be a screened intake box (19' x 6') with an automatic cleaning system. 16 inch steel pipe conveys water from the screen box to a 9' by 7' pump vault. Two 25 hp pumps will pump the water up the bank to fish rearing ponds.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: _____	Present population to be served water: _____
Type of connections: _____ (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: <u>N/A</u>	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = _____ ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? ☐ YES ☐ NO

Other Proposed Farm Uses

Describe all proposed uses: _____

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

This water will be used for aquaculture purposes. Juvenile salmon will be reared at this site and the water will be discharged back into Morse Creek. A pollution abatement pond is incorporated into this project to remove fish waste before water is discharged back into the stream.

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: The Morse Creek acclimation ponds proposal is situated at River Mile 1.0, approximately two miles east of Port Angeles, and is accessed from Highway 101 at Mile Post 252. If traveling from the west (Port Angeles) towards the site, turn left at Strait View Drive, make a u-turn back towards Port Angeles, cross the Morse Creek Bridge, and turn right onto site. If traveling from the east (Sequim), after crossing the Morse Creek Bridge, turn right onto the site just past Strait View Drive and Cottonwood Lane. No left hand turns are possible into or out from the site driveway onto US 101. The property is located within Township 30 N, Range 05 W, and Section 8.

Site Address: Milepost 252 on Highway 101

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Martin Peoples

Print Name
(Applicant or authorized representative)

Martin Peoples

Signature

8/10/09

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Submit your application to: DEPARTMENT OF ECOLOGY
CASHIERING SECTION
PO BOX 47611
OLYMPIA, WA 98504-7611

Please check the region in which your proposed project is located.

☒ Southwest ☐ Northwest ☐ Central ☐ Eastern

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Martin Peoples
Print Name
(Applicant or authorized representative)

Martin Peoples
Signature

8/10/09
Date

Kevin J. Dayton
Print Name
(Landowner of Place of Use)

[Signature]
Signature

9/10/09
Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

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